



Proforma Inv : CAS/20/PI0071

FAX: 6509 9501  
Email: contact@casgarage.sg

04.06.2020

Our Ref : SMJ 8706M

Your Ref : SLM 6368P

**M/s AXA Insurance Pte Ltd**  
8 Shenton Way  
#27-01  
Singapore 068811

Dear Sir/Mdm

**ACCIDENT INVOLVING SMJ 8706M AND SLM 6368P ALONG TECK WHYE CRESCENT ON 13.12.2019**

Please refer to the above mentioned accident.

We are writing in on the behalf of **TOH MING YAO** the registered owner of motor vehicle number **SMJ 8706M** which was involved in the above accident.

We are instructed that the above accident was caused solely and completely by the negligence of your insured's vehicle number **SLM 6368P** As a result of which, our client have suffered loss and and expenses.

We are instructed by our client to claim for :

1.	Cost of Repair ( <b>Recommended By LKK Adrian</b> )	\$	20,000.00
2.	Loss of Use ( 17 days x \$ 80)	\$	1,360.00
3.	GIA Fees	\$	29.00
4.	LTA Fees	\$	7.45

<b>TOTAL AMOUNT</b>	<b>\$</b>	<b>21,396.45</b>
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We enclsod hereby the following documents for your consideration :

- ( A ) Final Repair Bill
- ( B ) LTA Search Invoice
- ( C ) GIA Search Invoice
- ( D ) Letter of Authority

Kindly acknowledge receipt of the above said documents and your favorable reply is greatly appreciated.

**CAS GARAGE PTE LTD**  
JEN 201828067M  
1 KAKI BUKIT AVENUE 6, #02-22 AUTOBAY,  
SINGAPORE 417883

Ms Nicole Chong  
Administrator  
Mobile: 65 97916119  
Email: nicole@casgarage.sg



# INVOICE

AXA INSURANCE PTE LTD

**Invoice Date**

4 Jun 2020

CAS GARAGE PTE LTD

1 KAKI BUKIT AVENUE 6

**Invoice Number**

TI-20-0078-1193TP

#02-22 AUTOBAY

SINGAPORE 417883

**Reference**

SMJ 8706M HYUNDAI

AVANTE

Description	Quantity	Unit Price	Tax	Amount SGD
LUMP SUM REPAIR COST (RECOMMENDED BY LKK ADRIAN)	1.00	20,000.00	No Tax	20,000.00
			Subtotal	20,000.00
			<b>TOTAL SGD</b>	<b>20,000.00</b>

Due Date: 4 Jun 2020



## PAYMENT ADVICE

To: CAS GARAGE PTE LTD  
1 KAKI BUKIT AVENUE 6  
#02-22 AUTOBAY  
SINGAPORE 417883

Customer

AXA INSURANCE PTE LTD

Invoice Number

TI-20-0078-1193TP

Amount Due

20,000.00

Due Date

4 Jun 2020

Amount Enclosed

Enter the amount you are paying above

&gt; Back to OneMotoring



Land Transport Authority

10 Sin Ming Drive

Singapore 575701

GST Registration No. : M4-0006529-2

Print Date/Time : 16 Dec 2019 / 11:26:56

Receipt Date/Time : 16 Dec 2019 / 11:26:56

**Tax Invoice/Receipt**

Receipt No. : ITNET-00000-191216-001107

Previous Receipt No. :

S/N	Item Description/ Business Transaction Reference No.	Amount Before GST (\$\$)	GST Amount (\$\$)	Amount After GST (\$\$)
Result of Insurance Enquiry - SLT7665M				
As at 15 Dec 2019/18:45:00				
Insurance Co: MSIG INSURANCE (SINGAPORE) PTE LTD				
1	Insurance Enquiry - SLT7665M Enquiry Fee 20191216112459970358	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
Result of Insurance Enquiry - SKX5551L				
As at 14 Dec 2019/22:00:00				
Insurance Co: FWD SINGAPORE PTE. LTD.				
2	Insurance Enquiry - SKX5551L Enquiry Fee 20191216112500035350	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
Result of Insurance Enquiry - <b>SLM6368P</b> <i>SMJ 8706M</i>				
As at 13 Dec 2019/17:00:00				
Insurance Co: AXA INSURANCE PTE LTD				
3	Insurance Enquiry - SLM6368P Enquiry Fee 20191216112500099590	7.00	0.49	7.49
<b>Sub-Total</b>		7.00	0.49	7.49
<b>Total Before Rounding</b>		21.00	1.47	22.47
<b>Rounding Difference</b>				0.02
<b>Total Amount Payable</b>				22.45
Paid By				
	xxxxxxxxxxxx5744	Credit Card: Visa/MasterCard		22.45
<b>Total</b>				22.45
<b>Cash Change</b>				0.00
<b>Tendered Amount</b>				22.45
<b>Excess Refundable Amount</b>				0.00

THANK YOU AND HAVE A NICE DAY!

Please ensure that all payments to the Authority are good and promptly settled by the payment service provider / financial institution. Otherwise, the transaction and receipt is considered void and late fee may apply.



RECORDS MANAGEMENT CENTRE

**GENERAL INSURANCE ASSOCIATION OF SINGAPORE  
RECORDS MANAGEMENT CENTRE**

6 Raffles Quay #18-00, Singapore 048580

Phone: +65 6224 0010 Fax: +65 6224 0030

Operating Hours: Monday to Friday 9am to 5pm

GST Registration No: M400017735

**TAX INVOICE**

Our Ref No: GR-19-207511

Date of Request: 17/12/2019

Your Ref No: WALK IN GERALD

CAS GARAGE PTE LTD  
NO.1, KAKI BUKIT AVE 6, #02-22 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Your Vehicle No: SMJ8706M

Date of Accident: 13/12/2019

Place of Accident: TECK WHYE CRESCENT

Involving Vehicle No: SLM6368P (NO REPORT) VALID TILL 18-27/12

DESCRIPTION	AMOUNT (S\$)
E-File Search Fee (Public)	14.02
GST Amount	0.98
Total Amount Due (GST Inclusive)	15.00

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque



## TAX INVOICE

Our Ref No: GR-19-211728

Date of Request: 24/12/2019

Your Ref No: WALK IN GERALD

CAS GARAGE PTE LTD  
NO.1, KAKI BUKIT AVE 6, #02-22 AUTOBAY  
SINGAPORE 417883

Dear Sir/Madam,

Date of Accident: 13/12/2019

Vehicle No: SMJ8706M

Place of Accident: TECK WHYE CRESCENT (CCK AVE 1)

Involving Vehicle No: SLM6368P

With reference to your application for the accident report, we have attached the following accident reports as requested:

DOCUMENTS	ACCIDENT LOCATION	PER DOC (S\$)	QTY	AMOUNT (S\$)
SLM6368P	TECK WHYE CRESCENT (CCK AVE 1)	14.00	1	13.08
GST Amount				0.92
Total Amount Due (GST Inclusive)				14.00

The images provided to you are taken from the original reports forwarded to the centre by the members of the General Insurance Association of Singapore and we take no responsibility for their accuracy or contents and shall be under no liability whatsoever for any loss or damage arising out of or in connection with the reports or their images.

Thank You.

This is a computer generated document and requires no signature.

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For GIARMC Official use:

Date:

☐ GIRO ☒ Cash ☐ Cheque



FAX: 6509 9501

Email: contact@casgarage.sg

## LETTER OF AUTHORITY AND INDEMNITY

ACCIDENT INVOLVING VEHICLE NO. SMJ 8706M AND SLM 6368 P  
AT/ALONG Teck Whye Crescent (CEK AVE1)  
ON 13 DAY 12 MONTH 2019 YEAR

- I/We, the owner of vehicle no. SMJ 8706M hereby instruct and authorize you to commence repair to the said vehicles.
- You are further authorized to appoint solicitors on my/our behalf and give the solicitors full instructions as if the appointment are given by me/us with respect to the conduct of my/our claims against third party driver and/or his insurers including if necessary, to commence legal proceedings in Court in my/our name against the third party.
- You have my/our full authority to instruct my/our solicitors to negotiate a settlement with the third party and/or his insurers on such terms as you deem fit. Upon settlement of my claim, you are authorized to sign any Discharge Voucher or any document to confirm my acceptance of the settlement as full and final discharge of my claim, on my behalf.
- Upon resolving my/our claim, you are authorized to agree with my/our solicitors on the amount of their professional cost and disbursements for acting for me/us and to relieve payment of the balance of the settlement sum on my/our behalf directly into your account.
- In the event that, I/we am/are required to attend at my/our solicitors' office or to attend court in connection to my/our claim, I/we shall render full co-operation.
- If for whatever reasons, my/our insurers reject my/our claim for indemnity for the cost of repairs and/or any losses recoverable under the policy of insurance or make any offer to pay less than the amount claimed by you, I/we agree to undertake to pay the full amount of your repair bill and survey fees and any other expenses reasonably incurred on my/our behalf or to pay you the difference in amount, as the case may be.
- I/we have read and understand the above statement and agreed.

Dated this 13 day 12 month 2019 year

Signature : [Signature]  
Name : Toh Ming Yao  
NRIC/ROC No. : S81220724  
Address : Blk 464 CEK AVE 4 #14-  
19 S, 680464

Company Stamp





**"My execution of this Discharge Voucher is only for my claim for property damage and not prejudicial to any other claims"**

### AXA THIRD PARTY DIRECT SETTLEMENT

Vehicle No:	SLM 6368P (Insd veh)	Model: Hyundai Avante (1591cc)
	SMJ 8706M (TP veh)	
Date of Accident/ Time:	13/12/2019	

Repair Estimate	: \$	52,395.36	
Final Repair Cost	: \$		
Loss of Use	: \$		days at \$ per day
Rental (if any)	: \$		days at \$ per day
LTA / GIA Search Fee	: \$		
Others:	: \$		
Final Settlement Sum (Global Sum)	: \$	20,950.00	
Payee Name : Cas Garage Pte Ltd			
Is Third Party Workshop GIA Registered? [ ] YES [X] NO (Kindly indicate below)			
A)	For Non GIA Registered Workshop:	Agreed Liability <u>100</u> (%)	
B)	For GIA Registered Workshop:	BOLA Applicable: Yes/ No BOLA Scenario No: _____	
	BOLA Liability: _____ (%)	Assessed Liability (*): _____ (%)	
* Assessed Liability to be filled only for chain collisions and for cases where BOLA does not apply.			
Remarks:			

#### NOTE:

- PLEASE EXPRESSLY RESERVE YOUR CLIENT'S RIGHTS IF SO REQUIRED IN THIS SETTLEMENT DOCUMENT.
- THIS SETTLEMENT IS ON A WITHOUT PREJUDICE BASIS AND SHOULD NOT CONSTRUED AS AN ADMISSION OF LIABILITY ON AXA AND THEIR CLIENT/TORTFEASOR IN ANY MANNER WHATSOEVER.
- AXA RESERVES THEIR RIGHTS UNDER THE POLICY TERMS & CONDITIONS AS WELL AS THEIR RIGHTS IN LAW.

Only applicable to rental claim - All document are to be submitted with this settlement confirmation. In the event, rental agreement / invoices are **not received within 7 days** of this signed confirmation, we will automatically revert to loss of use claim per the NIMA rates.

We/I confirmed that this is a **full and final settlement** that we and or our client have/had/has against you (AXA and their policyholder/authorised driver/tortfeasor) for any and all losses (past/present/future) arising from this accident.

We confirmed that we have the authority of our client to act for and on their behalf in this accident.

 <b>CAS GARAGE PTE LTD</b> UEN 201828067M 1 KAKI BUKIT AVENUE 6, #02-22 AUTOBAY, SINGAPORE 119315 Signature of workshop representative / Workshop stamp Name of Representative: <u>CHONG AI XIN</u> Date: <u>8/6/2020</u>	 Signature of Witness / Workshop stamp (if applicable) Name of Witness: <u>GOK HUA LOON</u> Date: <u>8/6/2020</u>
	
Signature of AXA's surveyor/representative: Name of AXA's surveyor /Representative: Date: <u>09/06/2020</u>	



Auto  
Consultants  
Pte Ltd

51 UBI AVE 1, #01-25 PAYA UBI INDUSTRIAL PARK, SINGAPORE 408933 TEL : (065) 62563561 FAX : (065) 62564315

16 January 2020

**JASON TRANSPORT & TARDING**  
32 CHOACHU KANG STREET 64,  
#01-02 WINDERMERE  
SINGAPORE 689099

Dear Sirs,

**OUR REF : CC4/ASM19022087/Apa3 // S9M02A9G**

**YOUR REF : SLM 6368P**

**ACCIDENT INVOLVING SLM 6368P AND SMJ 8706M ALONG/AT TECK WHYE  
LANE TO CHOACHU KANG DRIVE ON 13/12/2019**

We refer to the above subject matter. We write to inform you that we are the loss adjuster appointed by your motor insurer, AXA Insurance Pte Ltd to deal with the third party claim against your policy.

We have received a third party claim(s) from **CAS GARAGE PTE LTD** acting on behalf of the owner of **SMJ 8706M** against your motor insurance policy.

Based on the accident report and accident scenario, liability is down against us. We will therefore proceed to negotiate for an amicable settlement with the Third Party.

Please be informed that your No Claim Discount (NCD) may be affected as a result of the claim against your policy.

As Insurers, they shall proceed to deal with the claim(s) subject to the merits of the case and according to the rights afforded under the policy. Should you not be seeking the protection of your policy and seek to take conduct of third party claim(s) arising from this incident, at your own cost and defence, please reply to us within 7 days from the date of this letter. Your intent must be formally expressed to AXA and acknowledged by AXA.

Your full co-operation in the handling of the claim is required and kindly submit the following to [chewht@lkkauto.com](mailto:chewht@lkkauto.com) within 7 days from the date of this letter **if not provided at our reporting centre**. The list below is not all inclusive and further document may be required:

- Police report, Police Investigation result, appeal against the Traffic Police offence and status (if any)
- Driver's driving license or foreign driving license (if any)
- Coloured photographs of accident scene (if any)
- Coloured photographs of damage to all vehicles involved (If any)
- Copy of the letter of authorization
- Video footage of accident (if any)
- Statement and/or police report from independent witness(es) (if any)
- If you or your passenger(s) are filing a claim against any of the involved Third Party(s), you are to keep us informed of your legal representative(s) and the status of the claim.



To protect your interest(s) in the handling of this claim, please do not discuss liability with any of the Third Party(s) and/or their legal representatives, or make any compromise or settlement without our prior knowledge and consent. If you receive any correspondence or legal document such as a Writ of Summons in connection with this accident, please forward it to us immediately. You may email it to [cst@axa.com.sg](mailto:cst@axa.com.sg) or deliver it by hand to AXA Customer Care Centre.

This letter should **not** be regarded as a waiver by AXA of their rights to repudiate any claim because of any breach of policy terms and conditions you and/or your authorised driver may have committed.

In the event of receiving and handling of any third party injury claim(s), we shall keep you informed of the final indemnity upon conclusion of the matter(s).

If you need any clarification, please do not hesitate to contact us at 6742 3197 or [chewht@lkkauto.com](mailto:chewht@lkkauto.com). Please quote our claim reference when you contact us that we can assist you more effectively.

Yours sincerely,



Chew Hsiao Tong  
Case Handler  
DID: 6742 3197  
FAX: 6741 4108  
EMAIL: [chewht@lkkauto.com](mailto:chewht@lkkauto.com)

Cc AXA Insurance Pte Ltd  
(Motor Claims Dept)